ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NA	1089/	1.1,2
O.I.P.E. CLASSIFIER	Ass.	y - 3011	
FORMALITY REVIEW	11115	66293	11/21/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim Date	Claim Date	Claim Date
1-10/7/20		
18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	Final	Final
Final Origin /// 6/2	Final	Origin
Final C Original C Origin	51	101
	52	102
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40000	54	104
	55	105
	56	106
7 4 0 0 0	57	107
8 0 0 0 0	58	108
91000	59	109
11 0 0 0 0	60	110
11 6000	61	111
12 0 0 0 0	62	112
12 0 0 0 0	63	113
14	64	114
15 0 0 0	65	115
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17 0 0 0 0	67	117
18 0 0 0 0	68	118
19 0 0 0 0	69	119
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20 0 0 0	70	120
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22 4 4 4	72	122
23 1 1 1	73	123
24 0 0 0 0	74	124
25 0 0 0 0 0 0 26 0 27 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	75	125
26 0 0 0 0	76	126
27 V/Q O O	77	127
28	78	128
29	79	129
30	80	130
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40	90	140
41	91	141
42	92	142
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45	95	145
46 ;	96	146
47	97	147
48	98	148
49	99	149
50	100	150

BEST AVAILABLE CO-

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)